

DEPARTMENT OF THE ARMY
Headquarters, California Army National Guard
Sacramento, CA 95826-9101
1 June 1995

CA ARNG Regulation 25-2

Military Publications

LETTERHEAD STATIONERY

HISTORY. This REGULATION supersedes CA ARNG Regulation 310-2 dated 1 October 1994.

Summary. Governs the use of letterhead stationery within the California Army National Guard.

Applicability. Applies to all California Army National Guard units.

Supplementation. Supplementation to this regulation is prohibited unless approved by the Director of Administration, OTAG.

Interim Changes. Interim changes to this regulation are not official unless authenticated by the Director of Administration, OTAG.

Suggested Improvements. The proponent agency of this regulation is the Director of Administration. Users are invited to send comments and suggested improvements to this headquarters, ATTN: CADA, P.O. Box 269101, Sacramento, CA 95826-9101.

Restrictions. Approved for public release; distribution unlimited. Local reproduction is authorized.

FOR THE GOVERNOR:

OFFICIAL



RICHARD E. BOARDSLEY
COL, US DEPARTMENT OF THE ARMY
Director of Administration

TANDY K. BOZEMAN
Major General
The Adjutant General

DISTRIBUTION:

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1. This regulation provides for the standardization of letterhead stationery used by the California Army National Guard. The letterhead provides organization designation and mailing address. Use of letterhead to indicate the organization structure or breakdown of a command, or personalized in any other way is prohibited.
2. Letterhead stationery will conform to the format prescribed by Appendix A.
3. Pre-printed letterhead stationery which includes distinctive insignia of the Headquarters to the right of the printed matter in the letterhead, and insignia of the next higher Headquarters to the left, will be printed, on request, for LTC commands and higher. Pre-printed letterhead stationery may be obtained in 1000 sheets or more lots by submitting a request (DD 844) to this headquarters ATTN: CADA-RP. Letterhead will be printed using black ink only. See Enclosure 1 for example of DD 844. No multi-color letterhead will be printed by this headquarters. Allow 90 days for receipt of letterhead stationery.
4. Units are permitted to use computer generated or typed letterhead, but without distinctive insignia, providing the contents are prepared in accordance with Appendix A. of this regulation.
5. Organizations may, at their discretion, use stationery with distinctive insignia printed in multi-colors, providing that letterhead is printed in a professional manner, at no expense to the State or Federal Governments, and the size and placement of distinctive insignia conform to that shown in the Appendix.
6. Organizations may use supplies of obsolete letterhead until stock is exhausted.

**LAYOUT AND SPECIFICATIONS
FOR PRINTING LETTERHEAD STATIONERY
FOR UNITS OF THE CALIFORNIA ARMY NATIONAL GUARD.**

1. The words "Department of the Army" will be included in the letterhead on the first line and set in all capitol letters in helvetica 10 point bold type with 11 point leading.
2. The words "California Army National Guard" will be included in the letterhead on the second line and set in all capitol letters in helvetica 8 point bold type with 10 point leading.
3. The full organization name and title will be printed on the third line of the letterhead and set in all capitol letters in helvetica 8 point bold type with 10 point leading.
4. The street address may be followed by a hyphen and the Post Office box address on the fourth line of the letterhead and set in all capitol letters in helvetica 8 point bold type with 10 point leading. The Post Office box may be used without the street address.
5. The city, state, and 9-digit zip code will be on the last line of the letterhead and set in all capitol letters in helvetica 8 point bold type.
6. The Department of Defense seal will be positioned as shown below and may be replaced with an insignia of the higher headquarters, provided size and placement requirements are met.
7. The 50th Anniversary WWII Logo will be positioned as shown below and may be replaced with the insignia of the unit, provided size and placement requirements are met.
8. The Department of Defense seal and the 50th Anniversary WWII Logos will not be used in combination with unit or higher headquarters crests.
9. Existing stocks displaying the Bicentennial logo distributed since April, 1987 will not be used.
10. The standard size of paper to be used is 8 1/2 by 11.
11. Official letterheads will be printed in black ink.

See example below.



DOD Logo 1 inch
dia., 1/2 inch from
top and left edges

DEPARTMENT OF THE ARMY
CALIFORNIA ARMY NATIONAL GUARD
FULL ORGANIZATION NAME/TITLE
STREET ADDRESS
CITY, STATE, 9-DIGIT ZIP CODE

5/8 inch to top trim

Center on 8 1/2 inches



50th Anniversary of
WWII Logo 1 inch
dia., 1/2 inch from top
and right edges

**Appendix B
Letterhead Distribution**

CA ARNG Regulation 25-2

PRINTING OF TYPES OF LETTERHEAD

Left Corner Logo	Center Address	Right Corner Logo
DOD Logo	OTAG Division SRCOM Brigade Battalion or LTC Commands	WWII 50th Anniversary Logo
CA ARNG Logo	Division SRCOM	Division Logo SRCOM Logo
Division Logo	Brigade SRCOM Brigade	Brigade Logo SRCOM Brigade Logo
Brigade Logo	Battalion LTC Commands	Battalion Logo LTC Commands Logo

EXAMPLE OF CA ARNG LETTERHEAD

LOGO	DEPARTMENT OF THE ARMY CALIFORNIA ARMY NATIONAL GUARD FULL ORGANIZATION NAME/TITLE STREET ADDRESS CITY, STATE, AND ZIP CODE(9-DIGIT)	LOGO
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APPENDIX C
INSTRUCTIONS FOR COMPLETING DD FORM 844

CA ARNG Regulation 25-2

REQUISITION FOR LOCAL DUPLICATING SERVICE
INSTRUCTIONS FOR COMPLETING DD FORM 844

1. DATE OF REQUEST: Current date.
2. DATE REQUIRED: Do not enter ASAP. If entered, it will be done after all other jobs are completed, regardless of request date.
3. JOB NUMBER: To be assigned by CADA-RP

PART A - REQUEST

4. REQUESTING OFFICE: Enter requesting office, activity, or organization.
BLOCK a,b,c: Self-explanatory.
BLOCK d: Name of originator and phone number.
5. DELIVERY INSTRUCTIONS:
BLOCK a: Delivery to regular distribution area only.
BLOCK b: Complete this block only if material needs to be picked up and phone number.
6. DESCRIPTION OF JOB:
BLOCK a: Blank.
BLOCK b: Title of item to be reproduced.
BLOCK c: Type of classification.
BLOCK d: Number of originals.
BLOCK e: Number of copies each.
BLOCK f: Self-explanatory.
7. SPECIFICATIONS:
BLOCK a: Always "Offset."
BLOCK b: Head to Head= Book, Head to Foot= Tumble.
BLOCK c: Self-explanatory
BLOCK d: Specify if cover is other than bond, and color is other than white.
BLOCK e: Specify if other than black such as red, blue, brown, etc.
BLOCK f: Self-explanatory
BLOCK g: Self-explanatory
BLOCK h: Self-explanatory
8. REQUESTER CERTIFICATION:
BLOCK a: Self-explanatory
BLOCK b: Self-explanatory
BLOCK c: Signature of the Director, Commander, or appointed publications management official of requesting office or activity.

PART B - APPROVAL (For CADA-RP Use Only)

**APPENDIX D
DD FORM 844**

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REQUISITION FOR LOCAL DUPLICATING SERVICE				1. DATE OF REQUEST		2. DATE REQUIRED		3. JOB NUMBER							
PART A - REQUEST															
4. REQUESTING OFFICE					5. DELIVERY INSTRUCTIONS										
a. ORGANIZATION			b. BUILDING		c. ROOM NO.		a. DELIVER TO								
d. FOR REFERENCE CONSULT: (1) Name			(2) Telephone Number		b. PERSON TO CALL IF TO BE PICKED UP (1) Name			(2) Telephone Number							
6. DESCRIPTION OF JOB					a. APPROPRIATION CHARGEABLE										
b. TITLE, FORM NO., ETC.				c. CLASSIFICATION <input type="checkbox"/> Classified <input type="checkbox"/> Unclassified <input type="checkbox"/> Other (Specify)		d. NO. OF ORIGINALS		e. NO. OF COPIES EACH		f. DISPOSITION OF ORIGINALS <input type="checkbox"/> Return <input type="checkbox"/> Destroy					
7. SPECIFICATIONS (X and complete all that apply)															
a. TYPE REPRODUCTION <input type="checkbox"/> Xerographic <input type="checkbox"/> Offset <input type="checkbox"/> Other (Specify)			b. PRINT <input type="checkbox"/> One Side <input type="checkbox"/> Head to Head <input type="checkbox"/> Head to Foot <input type="checkbox"/> Other (Specify)			c. FINISHED SIZE <input type="checkbox"/> 8-1/2 X 11 <input type="checkbox"/> Other (Specify)		d. PAPER <input type="checkbox"/> White <input type="checkbox"/> Other (Specify)		e. INK <input type="checkbox"/> Black <input type="checkbox"/> Other (Specify)					
f. COLLATE <input type="checkbox"/> Yes <input type="checkbox"/> No		g. STAPLE <input type="checkbox"/> Yes <input type="checkbox"/> No		h. ADDITIONAL SPECIFICATIONS (Including distribution, punching, padding, location of staples, etc.)											
8. REQUESTER CERTIFICATION. I certify that this work is authorized by regulations and is necessary to the conduct of official business.															
a. PRINTED NAME OF REQUESTER				b. SIGNATURE OF REQUESTER			c. SIGNATURE OF PRINTING CONTROL OFFICIAL								
PART B - APPROVAL (For reproduction unit use only)															
9. DATE RECEIVED		10. PRIORITY		11. OPERATOR		12. DATE COMPLETED		13. NO. OF COPIES REPRODUCED		14. DATE RECEIVED BY REQUESTER		15. JOB RECEIVED BY		16. DATE REQUESTER NOTIFIED JOB IS COMPLETE	

DD Form 844, FEB 89
224/012

*Consolidates DD Form 283 and DD Form 844,
which may be used until supply is exhausted.*

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